



Vacation Home License Application

Township of Acme, Grand Traverse County, Michigan

6042 Acme Road, Williamsburg, MI 49690

Phone: (231) 938-1350 Fax: (231) 938-1510 Web: www.acmetownship.org
 Planning & Zoning Administrator: Lindsey Wolf Email: zoning@acmetownship.org

Please complete this form & submit it with all applicable materials to the Acme Township Zoning Administrator.

This Application is for:

_____ New Permit _____ Renew Permit No.: _____

| I. APPLICANT INFORMATION | |
|--|---------------|
| Applicant Name: (Last) | (First) (MI) |
| Current Mailing Address: (Street) | (Apt./Ste.) |
| (City) | (State) (Zip) |
| Phone Number | Email |

| II. PROPERTY INFORMATION | |
|--|-------------------------|
| Vacation Home Address: (Street) | (Apt./Ste.) |
| (City) | (State) (Zip) |
| Parcel Number: | Zoning District: |
| Legal Description: (attach as a separate sheet if the legal description does not fit in the space provided) | |
| Number of bedrooms: | Parcel Acreage: |
| Parking: Please attach a sketch of your property that indicates the amount of designated parking spaces | |

| II. PROPERTY INFORMATION | | |
|--------------------------|-----|----|
| Attached | Yes | No |

| III. LOCAL AGENT | | |
|-----------------------------------|-------------|-------|
| Local Agent Name: (Last) | (First) | (MI) |
| Current Mailing Address: (Street) | (Apt./Ste.) | |
| (City) | (State) | (Zip) |
| Phone Number: | Email: | |

IV. UNDERSTANDING

Applicant acknowledges and agrees that it is subject to Acme Township’s ordinances and all other statutes, laws and regulations.

V. AFFIDAVIT

The undersigned affirms that he/she is the owner of the property involved in this application for the purpose of operating a vacation home and that the foregoing answers, statements and information are in all respects true and, to the best of his/her knowledge, correct. The undersign acknowledges that they shall comply with all statutes, laws, ordinances, and regulations that may apply to operating a vacation home. By making this application, the undersigned grants all officials, staff and consultants of Acme Township access to the subject property as required and appropriate to assess site conditions in support of a determination as to the suitability of the proposed project and/or current or future Acme Township Short-Term Rental Ordinance compliance.

Signature Date

FOR TOWNSHIP-USE ONLY

| | |
|---|------------------|
| The proposed use is permitted by the Acme Township Short-Term Rental Ordinance (2017-01), as amended: | |
| Yes | No |
| The proposed use is permitted by the Acme Township Zoning Ordinance (2017-01): | |
| Yes | No |
| Application No.: | Fee Tendered: |
| Filing Date: | Expiration Date: |
| Number of Bedrooms: | Acreage: |
| Maximum Number of Occupants: | |

Notes